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Using an Evidence-based Practice Tool to Improve Surgical Wound Classification

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Background

- Surgical wound classification documentation (SWCD) is a crucial factor in early identification of surgical site infection (SSI) and reimbursement exactitude.
- However, internal evidence showed a significant amount of SWCD inaccuracies.
- 20.23% (*n*=249) inaccuracies out of 1231 surgical cases audited from January to March 2022.
- Ideally, the goal is to achieve 100% accuracy (or zero inaccuracies).
- Current research evidence shows that effective learning is associated with using a multimodal educational approach.

Project Goals/Objectives

- To improve operating room (OR) nurses' documentation compliance and accuracy of surgical wound classification (SWC) by using a multimodal education approach to teach how to use the Association of PeriOperative Registered Nurses (AORN) SWC Decision Tree.

Implementation Plan

- Intervention timeframe April to July 2022.

Learning methods consisted of 1:1 sessions, PowerPoint presentation, and lectures demonstrating appropriate assessment and correct documentation when using AORN SWC Decision Tree.

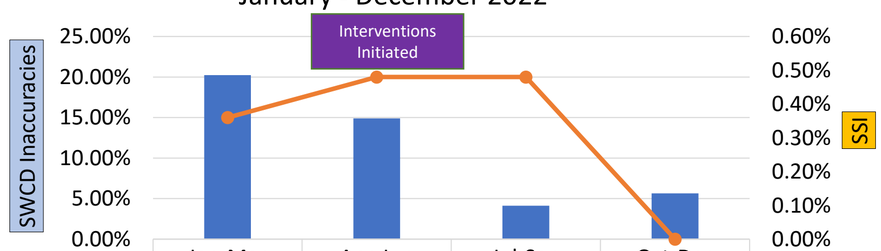
→ To assess education effectiveness, OR nurses were invited to attend workshops with pre- and post-test gaming (using Kahoot!).

Assessment of nursing SWCD accuracy involved a review of charts by surgical clinical nurse educator (CNE) from January to September 2022; SWCD in surgical operative notes were used as a point of comparison.

→ **If same nurse had more than three inaccuracies within one week, CNE provided 1:1 learning assessment and self-remediation/ accountability process.**

Outcomes

Surgical Wound Classification Documentation Inaccuracy & Surgical Site Infection Rates
January - December 2022



	Jan-Mar 2022	Apr-Jun 2022	Jul-Sep 2022	Oct-Dec 2022
SWCD Inaccuracies	20.23%	14.90%	4.13%	5.66%
SSI	0.36%	0.48%	0.48%	0%

Outcomes

- Ongoing post-intervention average inaccuracy rates were 4.13% (July to September 2022) and 5.66% (October to December).
- This represents a 72% decrease in SWCD inaccuracies.
- Subsequently, pre-intervention and post-intervention surgical site infection (SSI) rates were 0.36% and 0% respectively. A 100% decrease.

Discussion

- Project outcomes support successful implementation of innovative multimodal education strategy.
- This EBP project supports the safety culture/zero harm initiative within the OR via reduction of surgical wound misclassification, and thereby preventing potential complications.
- Nurse educator and leadership roles can enhance and positively influence changes to ensure continuous improvement in nursing clinical practice.

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References available upon request